Department of Toxic Substances Control Sacramento, California

f	UNIFORM HAZARDOUS	Generator's US EPA ID No.	Manifest Document No.	1	ormation in the shaded areas			
ľ	WASTE MANIFEST	CAD08651000	0501780	of d is r	not required by Federal law.			
	3. Generator's Name and Mailing Address Douglas Aircraft 19503 S. Normandic 4. Tolerator Phones. GA. 90	Company Attn:	R. Tuell A State N	danifest Document Nun enerator's ID	92301780			
	5. Transporter 1 Company Name	6. US EPA ID Numbe	C. State 1	ansparter's ID 4	01015149181			
	Laldlaw Environmental	8. US EPA ID Numbe	r EnState In	ansporter's ID	0)518-4700			
	9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID Chem - Tech Systems							
	3650 East 26th Los Angeles CA 11. US DOJ Description (including Proper Ship	Street	12. Containers No. Type	1	5056 . Unit t/Vol J. Waste Number			
GE	MENTILI PATRON TREATME	t, Oil, and wate WASUSINGUASTE Liqu	r	45240	State 223 EPA/Other N/R			
E R A	with this manifest will be t	certifies that the liquid waste receiverenced to standards mandated by the T and the Los Angeles County Sanitation Treatment/recycling is performed under the county Sanitation of the County Sanita	the on		State FPA/Other			
D R	permits granted by the Califo Control, Environmental Protec	ornia Department of Toxic Substantion Agency, Provisions of the Resout (RCRA) of 1976, and applicable fede	ces rce		State / EPA/Other			
	d. and state regulations. The gene is eliminated under both RCRA	rator's responsibility for this liquid wa and Proposition 65.	ste		State EPA/Other			
	J. Additional Descriptions for Materials Listed A CTS# 101012701 Materials from Mayor Later from GENER 15. Special Handling Instructions and Additional	AL MANAGERY 91/	0-10%	Codes for Wastes Lis b. d.				
	24 - Hour Emergency Response Telephone Number: (800) 424-9300							
	DOT ERG # 1/a) 31 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable federal, state and international laws.							
	If I am a large quantity generator, I certil economically practicable and that I have so threat to human health and the environmen waste management method that is available	y that I have a program in place to reduc elected the practicable method of treatment, tr; OR, if I am a small quantity generator,	e the volume and toxicity of waste storage, or disposal currently availed	generated to the degr	ee I have determined to be			
,	Printed/Typed Name Robert 17. Transporter 1 Acknowledgement of Receipt	Signature Signature	Let B. Two	U.G.	Month Day Year 0 8 2 9 9 4			
	Printed/Typed Name 18. Transporter 2 Acknowledgement of Receipt	AD Signature	Head		Month Day Year			
	Printed/Typed Name	Signature			Month Day Year			
	19. Discrepancy Indication Space	**************************************						
	20. Facility Owner or Operator Certification of Printed/Typed/Name	receipt of hazardous materials covered by the	is manifest except as noted in Item J	9.	Month Day Year			
	<u> </u>	DO NOT WRITE BEI	OW THIS LINE	<u> </u>	PROUBLE			

Yellow: TSDF S

TSDF SENDS THIS COPY TO GENERATOR WITHIN 30 DAYS.
(Generators who submit hazardous waste for transport out-of-state, produce completed copy of this copy and send to DTSC within 30 days.)

92301780 CENTER 1-800-424-8802: WITHIN CALIFORNIA, CALL 1-800-852-7550

IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPO

See Instructions on back of page 6.

Department of Toxic Substances Control

ise p	rint or type. Form designed for use on elite (12-pitch) typewriter.	Sacramento, California
1	WASTE MANIFEST CADO8651000501780 of 1	formation in the shaded areas not required by Federal law.
1	3. Generator's Name and Mailing Address Douglas Aircraft Company 19503 S. Normandie Avenue Mail Code: C6-59 Extance: CA 90502	92301780
	4. Tourefalors Phone 3, 4 4 3 905 926 08 (310) 5 33 - 7231 HAH 0 3 6 5. Transporter 1 Company Name C. State Transporter 1 10 Number	23513
	Laidlaw Environmental Services CADI 000831121 D. Transporter's Phone 9. Transporter 2 Company Name 8. US EPA ID Number E. State Transporter's ID	10)5/8-4700
	9. Designated Facility Name and Site Address 10. US EPA ID Number G. State Facility's ID	
	11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)	-5056 4. Unit
ŀ	"Machine Coolant, Oil, and Water Non-RCRA Hazardous Waste Liquid OILL TITAS 240	Nt/Vol I. Waste Number State 2 2 3
GEN	Non-RCRA Hazardous Waste Liquid 01011 TT 45240	P EPA/Other N/R
ER		EPA/Other
TO	c.	State EPA/Other
R	d. "	State
		EPA/Other
1	1. Additional Descriptions for Materials Listed Above ETS# 101012-01 Machine Coolant, Oil, and o. K. Handling Codes for Wastes L b.	Isted Above
	Signification of and all of the state of the	
l	24 - Hour Emergency Response Telephone Number:	(800) 424-9300
	DOT ERG # //a) 3/ 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of the consignment are fully and accurately described above by proper ship.	
	packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable federal, state and inte	ernational laws.
	If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the de economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which min threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste waste management method that is available to me and that I can afford.	nimizes the present and future
<u> </u>	Printed/Typed Name Robert G. Tuell Jr Signature Robert B. Tuell Jr	Month Day Year 0 8 2 9 9 4
RAN	17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name A PO A Signature Signature	Month Day Year
TRANSPORTER	18. Transporter 2 Acknowledgement of Receipt of Materials Printed/Typed Name Signature	Month Day Year
F	19. Discrepancy Indication Space	
A C I L		\$V
-	20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19. Printed/Typed Name Signature	Month Day Year

DO NOT WRITE BELOW THIS LINE.

92301780 IN CASE OF EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-8802: WITHIN CALIFORNIA, CALL 1-800-852-7550

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WEIGHT TICKET	Jan S	TRUCK #: 16044 / 16045, 7. DATE: 08-29-94	CONTENTS: Waste Contaminated Contant and a	DISPOSAL FACILITY: Chemi Lech.	DRIVER:	STATE MANIFEST DOCUMENT

WORK ORDER

LAIDLAW ENVIRONMENTAL SERVICES

221 E. "D" ST. • P.O. Box 1175 WILMINGTON, CA 90748-1175 (310) 518-4700 • (800) 955-5359

CUSTOMER/ACCT. NO 240120

sonable attorney's fees, expenses and costs.

NOT AN INVOICE - BILLING WILL FOLLOW

work order no. *** 08341

BILLING ADDRESS

SERVICE ADDRESS
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190 TH WORMANDIE
TORRALLE

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In the event of any litigation arising out of this agreement or any transaction contemplated hereby, the prevailing party shall be entitled to rea-

BOE-C6-0207290

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	roject Manager	Hrs. @	Per Hr.			
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